

Department of Public Health
Office of Health Care Access
Summary of the Applications Received in CY2017*

| AMOUNT | APPLICATION TYPE |
|---------------|---|
| 24 | Certificate of Need Application |
| 41 | Determination Request |
| 14 | Request for Modification of Certificate of Need |
| 79 | Total |

CERTIFICATE OF NEED STATUS

| AMOUNT | CON STATUS |
|---------------|-------------------|
| 10 | Approved |
| 8 | Still in Process |
| 4 | Agreed Settlement |
| 2 | Withdrawn |
| 24 | Total |

TYPES OF CON

| AMOUNT | CON CATEGORY |
|---------------|---|
| 1 | Imaging Equipment |
| 10 | Terminations |
| 1 | Increase in OR |
| 1 | Est. of Healthcare Facility** |
| 7 | Behavioral Health |
| 4 | Change of Ownership (ASC, Group Practice) |
| 24 | Total |

DETERMINATION STATUS

| AMOUNT | DTR STATUS |
|---------------|-------------------|
| 10 | CON Required |
| 31 | No CON required |
| 41 | Total |

* Includes applications received in calendar year 2017 with decisions rendered before 12/31/2017.

** Does not include Behavioral Health.